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PATENT APPLICATION FEE DETERMINATIO Substitute for Form PTO-875							N	RECORD		Application or Docket Number			
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL I	ENTITY	OR	OTHER THAN SMALL ENTITY			
FOR NUMBER FILED				NUMB	ER EXTRA		RATE FEE			RATE	FEE		
BASIC FEE (37 CFR 1.16(a))							1		s	OR		\$	
TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 =							x \$ =		OR	x \$ =	<u> </u>		
INDEPENDENT CLAIMS (37 CFR 1.16(b))				minus 3 = *				x \$ =			x s =	<u> </u>	
		NT CI	l,			-				OR			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) * If the difference in column 1 is less than zero, enter *0* in column 2.						j	+\$=		OR	+\$=			
- IT U						TOTAL		OR	TOTAL				
CLAIMS AS AMENDED - PART II OR OTHER THAN													
*	~II ~>	(C	olumn 1)		(Column 2)	(Column 3)		SMALL E	ENTITY	OR	OTHER THAN SMALL ENTITY		
ENT A		RE	CLAIMS EMAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID EOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N	Total / (37 CFR 1.16(c))	C	39	Minus	48	= /		x \$=		OR	× s=		
AMENDMENT	Independent (37 CFR 1.16(b))		5	Minus	- q	=/		× \$=		OR	x s=		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+s =		OR	+s =			
						ı	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Ca	olumn 1)		(Column 2)	(Column 3)				ı			
ENT B		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
M	Total (37 CFR 1.16(c))			Minus	**	=		× \$=		OR	× \$=		
AMENDMENT	Independent (37 CFR 1.16(b))	•		Minus	***	=		x \$=		OR	x s =		
Ā	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ \$=		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Co	olumn 1)		(Column 2)	(Column 3)	_						
ENT C		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
M	Total (37 CFR 1.16(c))			Minus	**	=		× \$=		OR	× s=		
AMENDMEN	Independent (37 CFR 1.16(b))			Minus	***	=		x \$=		OR	× \$=		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=		OR	+ \$=			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".													

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TC	TAL CLAIMS		42			RA	ΤE	FEE		RATE	FEE		
FOR			NUMBER F	ILED	NUMB	BASIC	BASIC FEE		OR	BASIC FEE	740.00		
то	TAL CHARGEA	BLE CLAIMS	リタminus 20=		. 28		X\$	X\$ 9=		OR	X\$18=	504	
IND	EPENDENT CL	AIMS	q mix	nus 3 =	. 6		X42=			OR	X84=	504	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT			+140=		OR	+280=	30/			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1748	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA	ALL I	ENTITY	OR	OTHER SMALL		
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	· 32	Minus	4	<u>X</u>	•	X\$	9=		OR	X\$18=		
AME	Independent + 5 Minus			ANA	9			2=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								0=		OR	+280=		
TOTAL ADDIT, FEE										OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu		(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 30	Minus	6		=	X\$	9=		OR	X\$18=		
	Independent	* 5	Minus	ENDEN	T CLAIM	-	X4	2=		OR	X84=		
							+14	0=		OR	+280=		
							ADDIT	OTAL FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)							
AMENDMENT C	2	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 31	Minus	(R	=	X\$	9=		OR	X\$18=	-	
	Independent			***				2=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +									OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL TOTAL ADDIT FEE									OR	TOTAL			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													